

APPLICATION NUMBER

| Claim |          | Date | Allowed | + Restricted | - Infringement | A Appeal | O Objected |
|-------|----------|------|---------|--------------|----------------|----------|------------|
| Final | Original |      |         |              |                |          |            |
| 1     | 1        |      |         |              |                |          |            |
| 2     | 2        |      |         |              |                |          |            |
| 3     | 3        |      |         |              |                |          |            |
| 4     | 4        |      |         |              |                |          |            |
| 5     | 5        |      |         |              |                |          |            |
| 6     | 6        |      |         |              |                |          |            |
| 7     | 7        |      |         |              |                |          |            |
| 8     | 8        |      |         |              |                |          |            |
| 9     | 9        |      |         |              |                |          |            |
| 10    | 10       |      |         |              |                |          |            |
| 11    | 11       |      |         |              |                |          |            |
| 12    | 12       |      |         |              |                |          |            |
| 13    | 13       |      |         |              |                |          |            |
| 14    | 14       |      |         |              |                |          |            |
| 15    | 15       |      |         |              |                |          |            |
| 16    | 16       |      |         |              |                |          |            |
| 17    | 17       |      |         |              |                |          |            |
| 18    | 18       |      |         |              |                |          |            |
| 19    | 19       |      |         |              |                |          |            |
| 20    | 20       |      |         |              |                |          |            |
| 21    | 21       |      |         |              |                |          |            |
| 22    | 22       |      |         |              |                |          |            |
| 23    | 23       |      |         |              |                |          |            |
| 24    | 24       |      |         |              |                |          |            |
| 25    | 25       |      |         |              |                |          |            |
| 26    | 26       |      |         |              |                |          |            |
| 27    | 27       |      |         |              |                |          |            |
| 28    | 28       |      |         |              |                |          |            |
| 29    | 29       |      |         |              |                |          |            |
| 30    | 30       |      |         |              |                |          |            |
| 31    | 31       |      |         |              |                |          |            |
| 32    | 32       |      |         |              |                |          |            |
| 33    | 33       |      |         |              |                |          |            |
| 34    | 34       |      |         |              |                |          |            |
| 35    | 35       |      |         |              |                |          |            |
| 36    | 36       |      |         |              |                |          |            |
| 37    | 37       |      |         |              |                |          |            |
| 38    | 38       |      |         |              |                |          |            |
| 39    | 39       |      |         |              |                |          |            |
| 40    | 40       |      |         |              |                |          |            |
| 41    | 41       |      |         |              |                |          |            |
| 42    | 42       |      |         |              |                |          |            |
| 43    | 43       |      |         |              |                |          |            |
| 44    | 44       |      |         |              |                |          |            |
| 45    | 45       |      |         |              |                |          |            |
| 46    | 46       |      |         |              |                |          |            |
| 47    | 47       |      |         |              |                |          |            |
| 48    | 48       |      |         |              |                |          |            |
| 49    | 49       |      |         |              |                |          |            |
| 50    | 50       |      |         |              |                |          |            |

If more than 150 claims or 10 actions  
staple additional sheet here